

CIRCUMCISION AND THE ABREACTION OF FEAR.

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AMONG war neurotics fear abreactions, either spontaneous or brought about in the course of psychotherapy, were by no means infrequent. The abreaction here dealt with, which occurred in private practice, will illustrate this psychological mechanism and is considered of sufficient interest to be briefly recorded. The patient, a medical man, single, age 31, diagnosed as a case of hysteria, had been undergoing treatment interruptedly for two years. A week previous to the day of the abreaction he complained of loss of interest in his work, inability to work, and great fatigue. These symptoms he thought might be due to certain defects in his metabolism, and he asked leave to consult an investigator in endocrinology, with a view to having his basal metabolism tested, in order that it might be ascertained which glandular extract would correct the deficiency and supply the need for his physical being. To this I assented, since these investigations could not interfere with the analytical work, although I realised that the symptoms of which he complained at that time were due to unconscious mental factors rather than to his metabolic processes.

The investigations took place about thirty-six hours before the abreaction occurred. The patient left the analytical treatment that afternoon (Wednesday) apprehensive at having to undergo these investigations, although, consciously, he displayed interest in them and they were of his own choice. The preparations for them needed retirement to bed at an early hour (7 p.m.), and abstinence from food for 12 hours. The night was an interrupted one, fear kept him awake, he was restless and slept intermittently. No dreams were recollected.

The following morning (Thursday), at 7 o'clock, the physician entered the patient's room bearing the necessary apparatus. The pulse registered 45. The apparatus consisted of a bag, which was placed over the patient's face: he was then told to breathe quietly, and within a minute he felt suffocated and made signs that the bag must be removed. He was reassured and the bag replaced. Breathing was quiet for eight or nine minutes and, the bag being removed, the investigations ended. He was given a meal and told that he could resume his medical duties. There was restlessness and uneasiness, and the remainder of the day was spent in attending to his medical work with great difficulty. He gave way to fits of crying and felt as if some great disaster were about to befall him, and the words "it is all up with me," "I am done for now," kept on repeating themselves. The throat and tongue felt parched

and dry, and waves of fear were experienced. That night (Thursday) was again restless. He was unhappy and apprehensive of some approaching unknown disaster. No dreams were remembered. The following morning (Friday) there was further difficulty in attending to medical work, and at 3 p.m. he entered the consulting room for his analytical treatment. The facial appearance was haggard and anxious, with dark, deep shadows under the eyes, and his manner was restless. His greeting was serious. He put himself into the supine position and began to describe the investigations, when suddenly he ceased to talk; a violent agitation of the limbs was in progress.

With his hands covering his face, he cried out in great anguish "Oh! Doctor, it is all up with me now," "Even *you* cannot help me." Then, very piteously, "I am done for now, Doctor!" The face and lips were blanched, the tremors were still violent, the whole frame shook, and the forehead looked moist. The voice was one of piteous distress, and he was calling for help. I felt it was time to take his pulse, and under the guise of reassurance, I held his wrist, which felt cold and moist, while the pulse registered 52. My movement gave him confidence. The colour began to return and the hysterical weeping gave place to the long drawn sobs of a small child and gradually ceased. I had returned to my chair behind him. There was silence for a couple of minutes, when he remarked "I feel better now."

This was an abreaction of fear and had lasted two-and-a-half minutes. He then explained in detail that when six years old, he was awakened one morning and given a light breakfast at 7 a.m. "Everyone seemed very kind," he said, particularly his mother and his aunt, neither of whom usually took any notice of him. He grew suspicious of these attentions and thought that something was about to happen. Soon he was wrapped in a blanket and carried downstairs attended by his old nurse, mother and aunt. Suddenly he was placed upon a table and left alone. Two men (surgeon and anaesthetist), dressed in black, appeared on the scene. One produced a bag with which he covered the patient's face. There was a short struggle and the words "it is all up with me," "I am done for now," passed through his mind, and the patient knew no more. After some hours he awoke, to find himself in bed with a pain in the genitalia. He had been circumcised for bed wetting.

The hour of treatment was now at an end and he left the room feeling that his fear had subsided. He had lost his anxious look, and smiled his thanks for the help he had received.

It is a simple matter to correlate this abreaction with the incidents that provided the stimulus, i.e., the endocrine investigations.
